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CONFIRMATION NO. 9283

SERIAL NUMBER 10/645,919	FILING OR 371(c) DATE 08/20/2003 RULE	CLASS 379	GROUP ART UNIT 2614	ATTORNEY DOCKET NO. 2705-294
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APPLICANTS

David P. Oran, Acton, MA

Yes CTS

** CONTINUING DATA *****

This application is a CON of 09/885,228 06/19/2001 PAT 6,636,594 which is a CON of 09/219,182
 12/22/1998 PAT 6,275,574

No CTS

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/15/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 10	TOTAL CLAIMS 1	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>l</i>	Initials			

ADDRESS

20575

TITLE

DIAL PLAN MAPPER

FILING FEE RECEIVED 1350	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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